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PTO/SB/01 (12-97)
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	I-2-0459.1US
	First Named Inventor	Haim et al.
	COMPLETE IF KNOWN	
	Application Number	10/799,951
	Filing Date	March 12, 2004
	Group Art Unit	2817
	Examiner Name	Not Yet Known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ENHANCED AUTOMATIC GAIN CONTROL
MECHANISM FOR TIME-SLOTTED DATA TRANSMISSIONS**

the specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) 03/12/2004 as United States Application Number or PCT International Application Number 10/799,951 and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/454,894	03/14/2003

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 4]

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DECLARATION — Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number

24374

OR

☐ Registered practitioner(s) name/registration number listed below

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Number Bar Code
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Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number
or Bar Code Label

24374

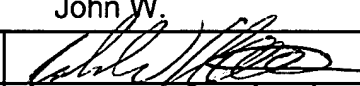
OR ☐ Correspondence address below

Name	VOLPE AND KOENIG, P.C. DEPT ICC				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
John W.		Haim	
Inventor's Signature			Date
Residence: City	Baldwin	State	NY
		Country	USA
Post Office Address	1848 Longfellow Street		
Post Office Address			
City	Baldwin	State	NY
		ZIP	11510
		Country	USA

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Fryderyk		Tyra	
Inventor's Signature <i>Fryderyk Tyra</i>		Date <i>July 22, 2004</i>	
Residence: City	Huntington Station	State	NY
		Country	USA
Citizenship	USA		
Mailing Address 21 Bradbury Avenue			
Mailing Address			
City	Huntington Station	State	NY
		ZIP	11746
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Louis J.		Guccione	
Inventor's Signature <i>Louis J. Guccione</i>		Date <i>7/22/04</i>	
Residence: City	East Chester	State	NY
		Country	USA
Citizenship	USA		
Mailing Address 211 Lincoln Place			
Mailing Address			
City	East Chester	State	NY
		ZIP	10709
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Timothy A.		Axness	
Inventor's Signature		Date	
Residence: City	Collegeville	State	PA
		Country	USA
Citizenship	USA		
Mailing Address 270 Richard Way			
Mailing Address			
City	Collegeville	State	PA
		ZIP	19426
		Country	USA

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Supplemental Sheet
Page 4 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Donald M.		Grieco	
Inventor's Signature <i>Donald M. Grieco</i>		Date 7/22/04	
Residence: City	Manhasset	State	NY
		Country	USA
Citizenship USA			
Mailing Address 18 Shore Road			
Mailing Address			
City	Manhasset	State	NY
		ZIP	11030
		Country	USA
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Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
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		Country	
Citizenship			
Mailing Address			
Mailing Address			
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		ZIP	
		Country	

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number **24374** OR ☐ Correspondence address below


Name	VOLPE AND KOENIG, P.C. DEPT ICC				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: John W. Haim ☐ A petition has been filed for this unsigned inventor


Given Name (first and middle (if any))		Family Name or Surname	
John W.		Haim	
Inventor's Signature			Date
Residence: City	Baldwin	State	NY
		Country	USA
Post Office Address	1848 Longfellow Street		
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Timothy A.		Axness	
Inventor's Signature 			Date 07/20/04
Residence: City	Collegeville	State	PA
		Country	USA
Citizenship USA			
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